

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled **RECOMBINANT PHAGES**, the specification of which is attached hereto unless the following box is checked:

was filed on 5 February 1997 as United States Application Number or PCT International Application Number PCT/SE97/00172 and was amended on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

			Priority Claimed
<u>9600434-6</u>	<u>Sweden</u>	<u>06-02-96</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
(Number)	(Country)	(Day/Month/Year Filed)	
			<input type="checkbox"/> Yes <input type="checkbox"/> No

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

(Application Number)	(Filing Date)	(Status - patented, pending, abandoned)

(Application Number)	(Filing Date)	(Status - patented, pending, abandoned)

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Jack Matalon, Reg. #22,441; Stefan J. Klauber, Reg. #22,604; David A. Jackson, Reg. #26,742; Michael D. Davis, Reg. #39,161; William C. Coppola\*

Address all telephone calls to David A. Jackson at telephone number (201)487-5800

Address all correspondence to Klauber & Jackson

411 Hackensack Avenue

Hackensack, New Jersey 07601

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor (given name, family name) Sven Mårdh

Inventor's signature Sven Mårdh Date July 14, 1995

Residence Sjölidens 13 Citizenship Sweden

Post Office Address S-582 25 LINKÖPING, Sweden

Full name of second joint inventor, if any (given name, family name) \_\_\_\_\_

Second Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_

Residence \_\_\_\_\_ Citizenship \_\_\_\_\_

Post Office Address \_\_\_\_\_

Additional inventors are being named on a separate sheet attached hereto.

Applicant or Patentee: PhaGen AB Docket No. 2344-1-001  
Serial or Patent No.: \_\_\_\_\_ Filed or Issued: Herewith  
For: RECOMBINANT PHAGES

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY  
STATUS (37 CFR 1.9(f) and 1.27(c)) -- SMALL BUSINESS CONCERN**

I hereby declare that I am

- the owner of the small business concern identified below:  
 an official of the small business concern empowered to act on behalf of the concern identified below:

NAME OF CONCERN PhaGen AB

ADDRESS OF CONCERN Berzelius Science Park, S-582 25 LINKÖPING, Sweden

I hereby declare that the above-identified small business concern qualifies as a small business concern as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention, entitled RECOMBINANT PHAGES

by inventor(s) Sven Mårdh

described in  the application filed herewith.

- application serial no. \_\_\_\_\_, filed \_\_\_\_\_.  
 patent no. \_\_\_\_\_, issued \_\_\_\_\_.

If the rights held by the above-identified small business concern are not exclusive, each individual, concern or organization having rights in the invention is listed below\* and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person made the invention or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d), or a nonprofit organization under 37 CFR 1.9(e).

\*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

FULL NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

INDIVIDUAL

SMALL BUSINESS CONCERN

NONPROFIT ORGANIZATION

FULL NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

INDIVIDUAL

SMALL BUSINESS CONCERN

NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING PhaGen AB / Sven Mårdh Sven Mårdh

TITLE OF PERSON OTHER THAN OWNER Director

ADDRESS OF PERSON SIGNING Berzelius Science Park, S-582 25 LINKÖPING, Sweden

SIGNATURE Sven Mårdh

DATE July 14, 1988